

JEFFERSON COUNTY TRUCK GROWERS ASSOCIATION SALES AGENT FORM

Members Name _____ Contact# (_____) _____ - _____

Address _____

Location of Farm _____ Farm Number _____

Are you a truck farmer? _____

Name of Agent(s) selling for you _____

List your main crops or produce to be marketed through the facility in the coming year

Produce	Acreage	Produce	Acreage

Do you engage in buying and selling on the Market? _____

I certify the information given herein is true and correct and I hereby agree to abide by the rules and regulations of Jefferson County Truck Growers Association.

To be an agent, the rule is as follows: A Farmer may sign any number of agents as they so choose. However, an agent may only sell for ONE farmer.

Farmers Signature: _____ Date: _____

Selling Agent: _____
Print Signature

Address: _____ City: _____

State & Zip: _____ Phone: _____